



16 June 2015

(By email: panel\_hs@legco.gov.hk)

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**HON TREASURER** 名譽司庫  
Dr LEUNG Fun Shing, Vincent  
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Dear Prof Lee and Mr Wong,

**Panel on Health Services and Panel on Commerce and Industry  
Joint Meeting on Regulation and Development of Beauty Services on  
23 June 2015**

**HON SECRETARY** 名譽秘書  
Dr LIU Wai Ming, Haston  
廖偉明醫生

Thank you for the letter dated 8 April 2015, inviting our Association to give views on the Regulation and Development of Beauty Services.

**COUNCIL MEMBERS** 理事  
Dr FOO Tai Chuen  
傅大全醫生

Concerns regarding the safety of dental bleaching treatments and products are heightened due to the existence of unsupervised and undiagnosed bleaching procedures undertaken by non-dental professionals and the introduction of at-home bleaching.

Dr LAU Kin Kwan, Kenny  
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Tooth bleaching/ whitening is a chemical procedure that can cause irreversible damage to human teeth if handled improperly. Intra-oral treatment and dental procedures like tooth bleaching provided by non-dental/ non-clinical professionals/ companies therefore pose a threat to the public health and should be banned.

**EXECUTIVE DIRECTOR** 行政總監  
Ms CHAN Ching Ha, Gladys  
陳靜霞女士

In general, there are three bleaching approaches for external bleaching of teeth: 1) dentist supervised night guard bleaching, 2) in-office or power bleaching and 3) at-home bleaching products. Because of the potential risks of acute and long-term effects brought about by tooth bleaching treatments, application of tooth whitening products and bleaching light, tooth bleaching should not be regarded as a simple cosmetic treatment. Tooth bleaching should **only be performed by registered dentists and regulated as practice of dentistry.** For optimal safety and to ensure proper diagnosis and treatment, examination by a dentist should be a must even for application of home-based tooth whiteners in whatever formats such as gum shields, strips or paint-on products which may contain relatively low concentrations of hydrogen peroxide.

**HON LEGAL ADVISERS** 名譽法律顧問  
Mr CHUNG Ho Yee, Nelson  
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Sometimes, tooth color can be improved by professional cleaning such as scaling and polishing to remove stain and tartar. However, tooth discoloration, particularly intrinsic discolorations, may not be simply amenable to bleaching. This may be a sign of a disease or condition that requires dental therapy. Therefore, pre-treatment examination and routine monitoring of bleaching by dentists are necessary for professional assessment of each patient's situation, recommendations for methods and / or materials to help minimize problems, as well as earlier detection and better management of any adverse effects.

More importantly, hydrogen peroxide has a well-known potential to cause irritations. Tooth bleaching materials are based primarily on hydrogen peroxide or carbamide peroxide. The use of hydrogen peroxide in orally applied products may cause irritation of mucous membranes in the oral cavity and in the gastric tract if the product is swallowed accidentally. Mucosal irritation, tooth dentine hypersensitivity, pulpal pain caused by bleaching on undetected caries and defective dental fillings are common complications of tooth bleaching procedures carried out by non-dental professionals. Conditions such as pre-existing tissue injury or the concurrent use of alcohol and/ or tobacco while using tooth whiteners may also exacerbate their toxic effects. Hydrogen peroxide, even at low concentrations, may be especially harmful to oral tissues if they have been previously injured.

Bleaching light is sometimes used with in-office bleaching procedures as well. Some reports suggest that pulpal temperature can increase with bleaching light use, depending on the light source and exposure time. Pulpal irritation and tooth sensitivity may be higher with use of bleaching lights or heat application, and caution should be taken in this regard.

Dentists are a key resource on oral health to the public at large. They take measures and give instructions to patients to ensure the risk of swallowing of bleaching agent by patients can be minimized. They also take particular care in administering bleaching agents to patients with gingivitis, periodontal disease, or pre-existing gingival lesions, and to those using alcohol and tobacco. Further, dental examination of tooth function and para-function may reveal conditions such as bruxism or temporomandibular dysfunction that may be aggravated by tray bleaching. Radiographs may be necessary to aid in screening and diagnosis of diseases or conditions that may manifest as tooth discoloration. In this regard, **non-dental personnel ought not to undertake such kind of dental procedures because they are not educated in the use of disease screening or diagnostic tests (such as radiographs), and infection control procedure.**



香港牙醫學會(有限公司)

Hong Kong Dental Association (Ltd.)

We notice that the new legal framework established by the Directive of the Council of the European Union has entered into force on 18 November 2011 to regulate the use of tooth bleaching products containing or releasing more than 0.1% of hydrogen peroxide. Member states are required to adopt provisions to comply with the Directive from 31 October 2012. In accordance with the Directive, only dental practitioners, and no other professionals, have direct access to tooth whitening and bleaching products with presence or release of more than 0.1% hydrogen peroxide.

Corresponding to the above Directive, the General Dental Council (GDC), the organization that regulates dental professionals in the UK, released a statement on 31 October 2012 and reaffirmed its position in relation to non-registrants providing tooth whitening. "Where an individual is not registered with the GDC they are not entitled to provide tooth whitening as tooth whitening falls within the definitions of practice of dentistry under sections 37 and 38 of the Dentists Act. The GDC will continue to prosecute individuals who carry out tooth whitening illegally under the Dentists Act 1984."

In Ireland, tooth whitening can only be carried out by a registered dentist. As the regulatory framework currently stands, dental hygienists or orthodontic therapists are not allowed to perform tooth whitening.

In light of the above circumstances, regulations governing the tooth whitening treatment and the use of dental whitening products should be further reinforced to eliminate unsupervised and undiagnosed bleaching procedures in Hong Kong.

We hope our input is instrumental to the future regulation and development of beauty services.

Yours sincerely,

For and on behalf of the HKDA Council

Dr Sigmund Leung, JP  
President  
Hong Kong Dental Association